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Bib Data Sheet

CONFIRMATION NO. 2674

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|--|--|--|------------------------|---|--|--|--|-----------------------|----------------------------|
| SERIAL NUMBER 10/817,075 | FILING DATE 04/02/2004 RULE | CLASS 242 | GROUP ART UNIT 3654 | ATTORNEY DOCKET NO. 0105096-0522513 | | | | | |
| APPLICANTS David Michael Patterson, Union, KY; | | | | | | | | | |
| ** CONTINUING DATA ***** <i>EM</i> <div style="text-align: center;"><i>no</i></div> | | | | | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>W</i> <div style="text-align: center;"><i>no</i></div> | | | | | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 06/18/2004 | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 5px;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance </td> <td style="width:15%; padding: 5px;"> STATE OR COUNTRY KY </td> <td style="width:10%; padding: 5px;"> SHEETS DRAWING 4 </td> <td style="width:10%; padding: 5px;"> TOTAL CLAIMS 19 </td> <td style="width:20%; padding: 5px;"> INDEPENDENT CLAIMS 3 </td> </tr> </table> | | | | | Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY KY | SHEETS DRAWING 4 | TOTAL CLAIMS 19 | INDEPENDENT CLAIMS 3 |
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| ADDRESS 26874 FROST BROWN TODD, LLC 2200 PNC CENTER 201 E. FIFTH STREET CINCINNATI, OH 45202 | | | | | | | | | |
| TITLE Fishing bobbin | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; padding: 5px;"> FILING FEE RECEIVED 385 </td> <td style="width:55%; padding: 5px;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td style="width:30%; padding: 5px;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ </td> </tr> </table> | | | | | FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ | | |
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